

OVERVIEW

Alaska Native 2001 User Population.

ALASKA AREA TOTAL	118,648
Anchorage Service Unit	43,084
Annette Island Service Unit	1,303
Barrow Service Unit	4,511
Bristol Bay Area Service Unit	5,661
Interior Service Unit	13,349
Kotzebue Service Unit	7,108
Mt. Edgecumbe Service Unit	14,829
Norton Sound Service Unit	6,828
Yukon-Kuskokwim Service Unit	21,975

Users are defined as beneficiaries who used a facility that reports through the IHS data system at least once between 10/1/1998 and 9/30/2001.

NOTE: See each service unit section for user population by tribal organization.

Native People of Alaska. The Alaska Native population includes Eskimos, Aleuts and Indians. More than half of all Alaska Natives are Eskimos, one-third are Indians, and the rest are Aleuts. The map on the following page displays Alaska's ethnic groups.

The Eskimos. The two main Eskimo groups, Inupiat and Yupik, differ in their language and geography. The former live in the north and northwest parts of Alaska and speak Inupiaq; the latter live in the southwest and speak Yupik. Some Eskimos speak their traditional Inupiaq or Yupik language as well as English.

Along the northern coast of Alaska, Eskimos are hunters of the enormous bowhead and beluga whales, walrus and seal. In northwest Alaska, Eskimos live along the rivers that flow into the area of Kotzebue Sound. Here, they rely less on sea mammals and more upon land animals and river fishing. Most southern Eskimos live along the rivers flowing into the Bering Sea and along the Bering Sea Coast from Norton Sound to the Bristol Bay region.

The Aleuts. Most Aleuts originally lived in coastal villages from Kodiak to the farthest Aleutian Island of Attu. They spoke three distinct dialects, which were remotely related to the Eskimo language. When the Russians came to the Aleutian Islands in the 1740s, Aleuts inhabited almost every island in the chain. Now, only a few islands have permanent Aleut villages. Their main occupation is commercial fishing, with other occupational jobs such as working in canneries, for the cities, boroughs, school districts and private businesses.

Alaska Area

The Interior Indians. The Athabascans inhabit a large area of Central and Southcentral Alaska. They may have been the first wave of Natives to cross the land bridge over 15,000 years ago. Although their language is distinct, they may be linguistically related to the Navajo and Apaches of the Southwest U.S. There are eight Athabaskan groups in Alaska. Characteristics of all eight groups include similar language, customs and beliefs.



The Southeast Alaska Indians. Three major Indian tribes inhabit Southeast Alaska: the Tsimpsians, Haidas, and Tlingits. They live along the Alexander Archipelago from Ketchikan to Katalia. The shellfish, salmon, seal, berries, deer, black bear and brown bear provided subsistence, enabling these groups to live in permanent villages.

Environmental Factors. Alaska encompasses one-fifth of the total land mass of the United States. Within this 586,000 square miles exist all the terrain features present anywhere else in the country. Alaska has deserts, plains, swamps, forests, glaciers, ice fields, fjords, river systems, volcanoes, thousands of islands and six major mountain ranges. With two oceans and three major seas, Alaska has as many miles of sea coast as the combined Atlantic and Pacific seaboard.

Enormous distances separate most communities in Alaska. Anchorage is 1,445 miles from Seattle, Washington, the nearest city by airline to the 48 states. Vast mountain ranges, stretches of tundra, glaciers, impassable river systems, and open waters separate communities within the state. The distance from many communities to the nearest medical facility is equivalent to the distance from New York to Chicago.

The State of Alaska is one congressional district. Don Young, (R), Ted Stevens (R) and Lisa Murkowski (R) represent Alaska in the United States senate.

Utilities. Communities in Alaska are often small in population and separated by great distances, vast mountain ranges, oceans and major river systems. Because of these characteristics, utilities in most settlements serve only that community. Common water supplies and waste disposal systems that exist in other states often are more sparse in Alaska. Electricity is often powered by diesel generators.

Communications. Tribal health programs differ widely in their capacity to electronically access and augment patient records in the statewide data system. Few have the equipment and telecommunication industry support needed to use telemedicine. A new federal initiative will

greatly augment this capacity in the next two years. Small local telephone systems have problems such as inclement weather, lack of maintenance parts, and trained personnel, geographic barriers and distances involved. Long distance carriers in some parts of the state need to update their infrastructure (such as satellite earth stations) to make the transmission of digital images possible.

Confidentiality concerns and federal law prohibit sending patient records through the Internet, and tribal health centers must establish dedicated lines. Systems that have the bandwidth necessary to transmit voice-over-data and rudimentary telemedicine are priced between \$800 and \$3,000 per facility per month at the village level. The Universal Services Fund (USF) Program provides subsidies for Internet connections in rural health clinics and rural schools. Numerous communities have local dial-up Internet service, but still cannot access the Internet.

Most communities plan to consolidate communication systems with schools and other local groups to share larger and more economical systems. Small village clinics plan to transmit "store and forward" telemedicine images at 56K or 128K maximum. The regional health centers and hospitals plan to use frame relay and T1 systems that would support "live" telemedicine at a 364K minimum. Health facilities located in urban centers and rural hubs will coordinate the connections between their villages and the statewide system.

There are currently studies being carried out to determine the feasibility of using telephone surveys to measure health risk factors in urban and rural Alaska Natives. The percentage of Alaska Native homes with residential telephone service is not known at this time. Service units estimate that over 90% of private residences have telephone service, and some estimate in excess of 95%.

Transportation. According to the Alaska Department of Transportation, Alaska has 13,323 miles of roads and 2,229 ferry miles for a total of 15,552 miles.

No road system exists to link over 80% of approximately 200 Alaska Native communities in the state. More than one-half of the people served by the Alaska Native tribal health organizations live in these rural and remote locations.

Air transportation is, by necessity, the primary means of travel for health services in rural Alaska. Because of distance and weather, air travel is unreliable and expensive. To receive basic medical care, a patient may fly as far as 1,100 miles. Physicians or dentists may travel an equal distance to the community. Transportation, the cost of travel, and distance have the effect of making many health services inaccessible to the people unless it is essential.

Housing. Housing varies greatly throughout the State of Alaska. In Anchorage, Fairbanks, Juneau and other major population centers, residential areas have streets, utilities, fire protection and other modern conveniences. In contrast, most of the rural communities are still less developed. They lack the infrastructure and economy necessary to finance roads, adequate utilities, housing and fire protection.

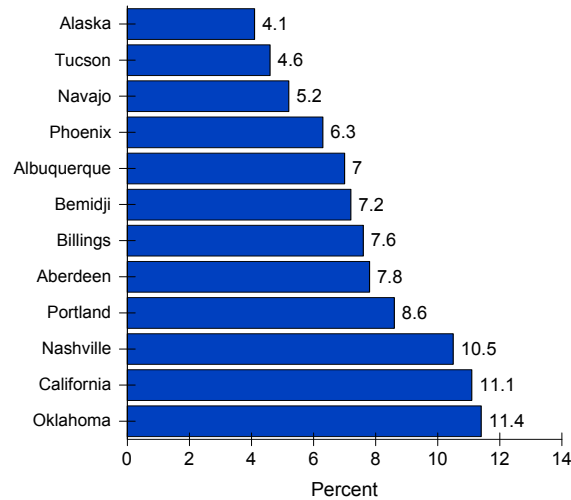
Education. While few Tribes receive separate funding for health education in their contracts, there is some level of health education provided in each region.

Natural Resources. Alaska has the largest energy potential of any state and most countries in the world. These energy assets include coal, petroleum, gas, geothermal, hydroelectric, wind and solar. Also, 30 of the 32 minerals considered essential to the United States exist in commercial scale deposits in Alaska. Important renewable resources in the state are timber, seafood, and agricultural products. Developing these natural resources while protecting wilderness habitat is a challenge that will face future generations of Alaskans.

Employment. Rural employment opportunities are limited for American Indians/Alaska Natives (AI/AN) because employment in a cash/salary job market is limited in most rural and remote parts of the state.

The unemployment rate for rural bush communities is twice as high as the urban areas of the state. In areas where fishing is the form of employment, work becomes seasonal. Natives who reside in rural communities rely on subsistence hunting and fishing and seasonal employment. Many rural communities can not support a diligent cash economy due to scarcity of jobs, remoteness, high costs, and limited resources.

**American Indians/Alaska Natives
Percent Bachelor's Degree or Higher
Age 25 and Older
1990 Census State-Level Indian Data**



Includes data for 35 Reservation States (South Carolina and Indiana were added as Reservation States in 1994 and 1995, respectively) Source: DHSS, IHS, OPH, DCEH, Program Statistics Team, Regional Differences in Indian Health 1997

**Alaska Boroughs & Census Area
Sex by Employment Status
for the Population 16 Years +
2000 Census**

borough	Males Employed	Females Employed	Males Unemployed	Females Unemployed
Aleutians East Borough	670	416	676	92
Aleutians West Borough	2,135	1,117	389	84
Anchorage Municipality	65,599	60,138	5,472	3,638
Bethel Census Area	2,836	2,645	617	319
Bristol Bay Borough	328	253	47	21
Denali Borough	507	334	76	34
Dillingham Census Area	879	886	165	65
Fairbanks North Star Borough	18,249	17,009	2,003	1,532
Haines Borough	538	454	95	62
Juneau City & Borough	8,563	7,974	635	300
Kenai Peninsula Borough	11,274	9,090	1,674	956
Ketchikan Gateway Borough	3,605	3,412	338	243
Kodiak Island Borough	3,220	2,911	185	150
Lake & Peninsula Borough	290	291	75	0.22
Matanuska-Susitna Borough	13,811	11,170	1,744	1,123
Nome Census Area	1,610	1,497	435	173
North Slope Borough	1,642	1,348	315	210
Northwest Arctic Borough	1,293	1,134	300	147
POW-Outer Ketchikan CA	1,467	1,147	311	150
Sitka City & Borough	2,193	2,159	188	179
Skagway-Hoonah-Angoon CA	832	639	158	116
Southeast Fairbanks CA	1,030	902	265	150
Valdez-Cordova CA	2,501	1,962	307	167
Wade Hampton CA	874	951	383	191
Wrangell-Petersburg CA	1,643	1,388	276	97
Yakutat City & Borough	287	153	27	10
Yukon Kuskokwim CA	1,158	1,118	405	161

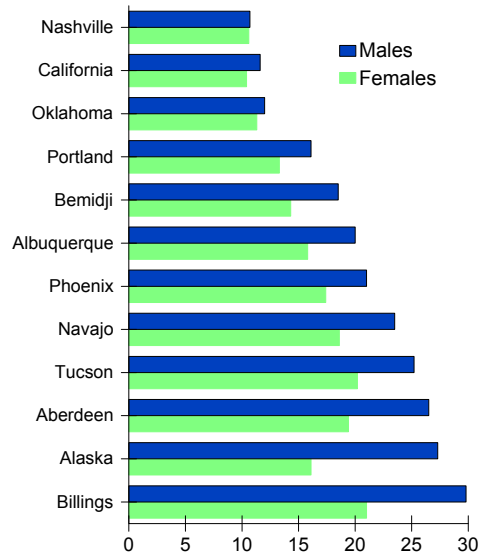
CA = Census Area; source: US Census Bureau, 2000 Census of Population & Housing, Summary File 3

Per Capita Personal Income Alaska and by Census Area

	1999	1998
State of Alaska	28,629	27,950
Bristol Bay Borough	43,996	43,242
Denali Borough	38,410	32,098
Juneau Borough	33,974	33,201
Anchorage Municipality	33,813	32,992
Aleutians West	32,478	28,815
Ketchikan Gateway Borough	32,412	31,739
Haines Borough	30,681	29,720
Sitka Borough	29,895	28,272
North Slope Borough	29,025	29,218
Valdez-Cordova	28,211	28,070
Aleutians East Borough	27,792	24,267
Wrangell-Petersburg	27,414	25,948
Yakutat Borough	26,478	26,957
Fairbanks North Star Borough	26,082	25,357
Dillingham	25,935	25,069
Skagway/Hoonah/Angoon	25,787	24,426
Kenai Peninsula Borough	25,478	25,266
Kodiak Island Borough	25,204	23,866
Southeast Fairbanks	22,629	21,647
Nome	21,258	20,560
Northwest Arctic Borough	21,090	20,700
Prince of Wales-Outer Ketchikan	19,548	18,477
Lake & Peninsula Borough	19,533	17,945
Yukon-Koyukuk	19,126	18,394
Matanuska-Susitna Borough	18,615	18,583
Bethel	17,131	17,508
Wade Hampton	13,029	12,699

Source: State of Alaska, Alaska Department of Labor and Workforce Development, Research and Analysis Section, Alaska Economic Trends, July 2001, p15.

Percent of Males & Females Unemployed Age 16 and Older 1990 Census State-Level Indian Data



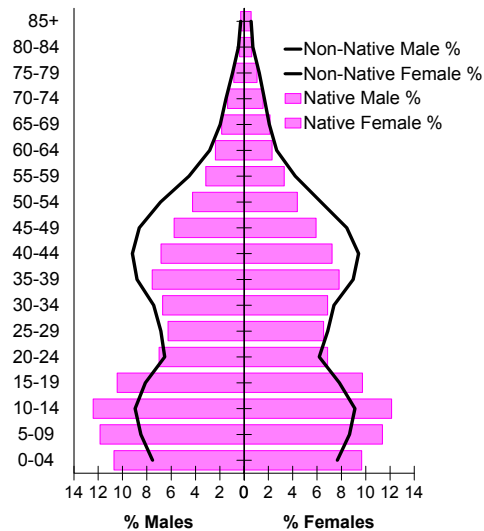
Includes data for 35 Reservation States (South Carolina and Indiana were added as Reservation States in 1994 and 1995). Source: DHHHS, IHS, OPH, DCEH, Program Statistics Team, Regional Differences in Indian Health 1998-99, p30.

Average Age. The following graph displays the 2000 population estimates between the Alaska Non-Native population vs. Alaska Native population by age and sex. The fastest growing age segments of the Native population are children 10-14 years.

DESCRIPTION OF AREA HEALTH CARE DELIVERY SYSTEM/ALASKA AREA MAPS DELINEATING SERVICE UNITS & FACILITIES

Direct Clinical Services. The Alaska Area Native Health Service works in conjunction with nine tribally operated service units in Alaska to provide comprehensive health services to approximately 120,000 Alaska Native people. Through the provision of 19 Title I

Alaska Population Estimates by Age, Race & Sex 2000



NOTE: American Indian/Alaska Native alone or in combination with one or more of the other five races.
SOURCE: State of Alaska, Alaska Department of Labor and Workforce Development, Research and Analysis, Census & Geographic Information Network and U.S. Census Bureau, 2000 Census of Population and Housing, Summary File 2.

2000popest.ppt4

Alaska Area

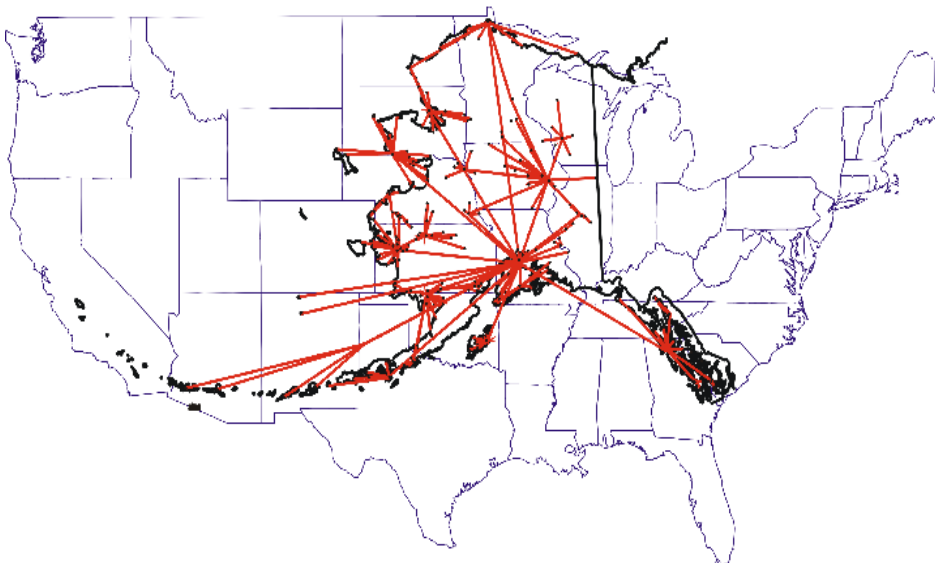
contracts, 38 grants and one compact with 21 Title V funding agreements, Alaska tribes administer 99% of the Indian Health Service funds earmarked for Alaska. Seven tribally operated hospitals are located in the communities of Anchorage, Barrow, Bethel, Dillingham, Kotzebue, Nome and Sitka. There are 25 tribal health centers and 176 tribal community health aide clinics operated throughout the State. Private hospitals and practitioners supplement Native health care in urban centers throughout Alaska.

The Area Office is located in Anchorage with a staff of 46 individuals. Twenty-three positions are federal residual, one is a personal services contract and the remaining are transitional federal positions.

Alaska Native Medical Center (ANMC). Located geographically within the boundaries of Southcentral Foundation tribe, ANMC operates as the “gatekeeper” for most of the specialty care required by Alaska Natives in all regions of the State. Sixty-two percent of the inpatient days at ANMC are referred from outside of the service area and 28% of all outpatient visits are referred from outside.

The Alaska Native Medical Center (ANMC) is managed by two tribal health organizations: Alaska Native Tribal Health Consortium (ANTHC) which operates approximately two-thirds of the program, and Southcentral Foundation (SCF) which operates approximately one-third.

The Alaska Native Health Care System Referral Pattern Same Scale Comparison - Alaska Area to Lower 48 States

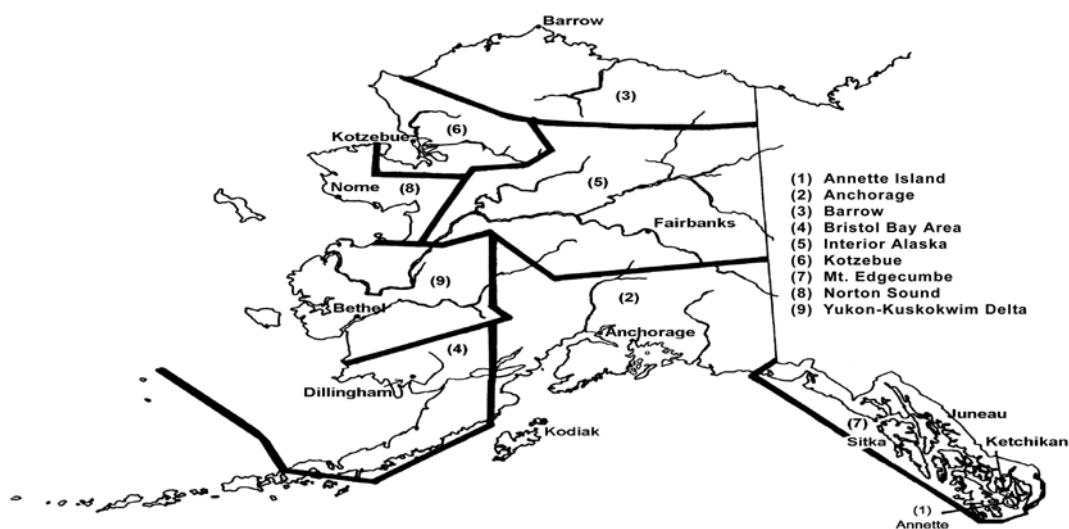


Southcentral Foundation purchases services from the Consortium so that all of the core central components of the Medical Center are managed solely by the Consortium (including the emergency room, pharmacy, radiology, internal medicine, surgery, etc.). A revenue-sharing

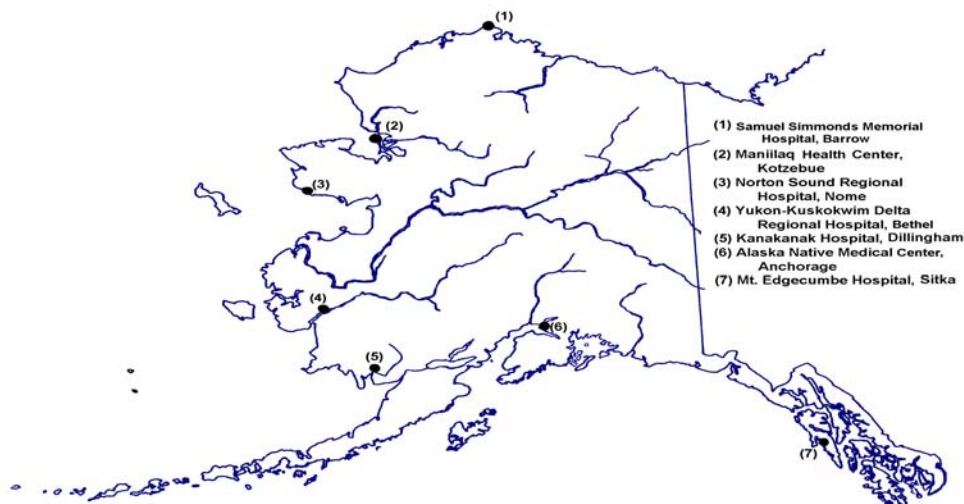
Alaska Area

agreement was developed so that both organizations benefit from collections from Medicaid, Medicare, and private insurance payors fairly.

Alaska Area Service Units



Tribally Operated Hospitals



Hospital Addresses.

Alaska Native Medical Center - 4315 Diplomacy Drive, Anchorage, AK 99508

Kanakanak Hospital - P.O. Box 130, Dillingham, Alaska 99576

Maniilaq Health Center - P.O. Box 43, Kotzebue, Alaska 99752

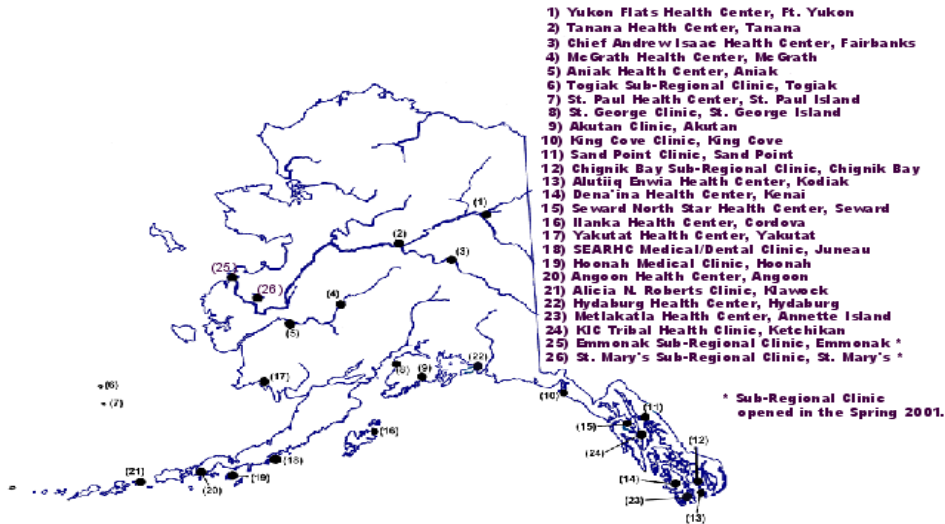
Mt. Edgecumbe Hospital - 222 Tongass Drive, Sitka, Alaska 99835

Norton Sound Regional Hospital - P.O. Box 966, Nome, Alaska 99762

Samuel Simmonds Memorial Hospital - 1296 Agvik Street, Barrow, Alaska 99723

Yukon-Kuskokwim Delta Regional Hospital - P.O. Box 287, Bethel, Alaska 99559

Tribally Operated Health Centers



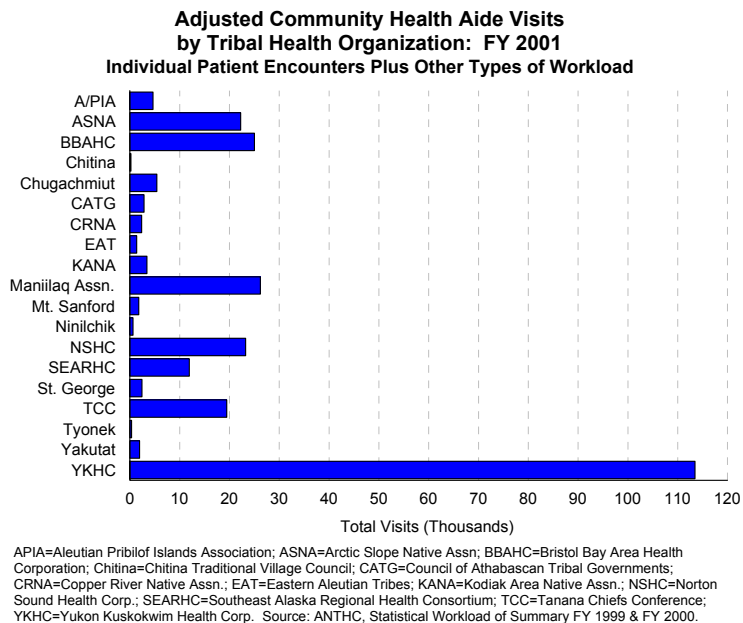
Health Center Addresses.

Akutan Clinic - P.O. Box 113, Akutan, AK 99553
Alicia N. Roberts Medical Center - P.O. Box 163, 830 Craig-Klawock Hwy, Klawock, AK 99925
Alutiiq Enwia Medical Clinic - 402 Center Avenue, Kodiak, Alaska 99615
Angoon Health Center - P.O. Box 27, 600 Chinook Way, Angoon, AK 99820
Aniak Subregional Clinic - P.O. Box 269, Aniak, Alaska 99557
Chief Andrew Isaac Health Center - 1638 Cowles Street, Fairbanks, Alaska 99701
Chignik Bay Sub-Regional Clinic - P.O. Box 90, Chignik, AK 99564
Emmonak Sub-Regional Clinic - General Delivery, Emmonak, Alaska 99581
Ilanka Health Center - P.O. Box 1388, Cordova, Alaska 99574
Dena'ina Health Clinic - 416 Frontage Road, Kenai, Alaska 99611
Hoonah Medical Clinic - P.O. Box 103, Hoonah, AK 99829
Hydaburg Health Center - P.O. Box 333, 8th Street Extension, Hydaburg, AK 99922
KIC Tribal Health Center - 3289 Tongass, Ketchikan, Alaska 99901
King Cove Clinic - P.O. Box 206, King Cove, AK 99612
McGrath Health Center - P.O. Box 10, McGrath, Alaska 99627
St. Mary's Sub-Regional Clinic - General Delivery, St. Mary's, Alaska 99658
Metlakatla Health Center - P.O. Box 439, Metlakatla, Alaska 99926
St. Paul Health Center - P.O. Box 148, St. Paul Island, Alaska 99660
St. George Clinic - P.O. Box 934, St. George Island, Alaska 99591
Sand Point Clinic - P.O. Box 172, Sand Point, AK 99661
Seward North Star Health Clinic - P.O. Box 1429, Seward, Alaska 99664
SEARHC Medical/Dental Clinic - 3245 Hospital Drive, Juneau, Alaska 99801
Tanana Health Center - P.O. Box 130, Tanana, Alaska 99777
Togiak Sub-Regional Clinic - General Delivery, Togiak, AK 99678
Yakutat Health Center - P.O. Box 112, Yakutat, Alaska 99689
Yukon Flats Health Center - P.O. Box 33, Fort Yukon, Alaska 99740

Community Health Aides/Village Clinics. The principal provider of health services at the village level is the community health aide. Chosen by the village council, the community health aide (CHA) is responsible for giving first aid in emergencies, examining the ill, reporting their symptoms to the physician, carrying out the treatment recommended, instructing the family in giving nursing care and conducting health education in the villages. Community Health Aide/Practitioners (CHA/Ps) provide primary health care and preventive health services in the villages. About 90% of the villages served by CHA/Ps are accessible only by small engine aircraft. CHA/Ps respond to medical emergencies 24 hours a day in addition to working standard clinic hours. They store and can dispense prescription drugs with telephone/radio physician instructions.

Periodically, other health professionals make field trips to work with CHA/Ps. These include the Alaska Native Medical Center (ANMC) or regional physicians, coordinator-instructors, sanitarians, veterinarians and public health nurses. Usually, however, CHA/Ps work alone in the villages.

CHA/Ps use telephones or radios to contact tribal health organization physicians. Sometimes, however, communication is impossible. Then the CHA/Ps must rely on their own skills and resources, using the *Community Health Aide Manual* and standing orders. The CHA manual is widely recognized and used throughout the world by various agencies.



There are 176 tribally operated village-built clinics with about 500 community health aides or practitioners (CHA/Ps) delivering health care to Alaska Natives. The following graph displays the CHA visits by tribal health organization for FY 1999.

State Public Health Centers & Nurses. The nursing section of the State of Alaska, Department of Health and Social Services, serves approximately 298 Native and non-native communities.

A work force of about 90 public health nurses implements most of the health service programs.

Some nurses work in regular health centers, while itinerant PHNs regularly travel to small communities in rural areas. The latter work closely with community health aides.

Public health nurses devote much of their time to serving very young children and medically underserved pregnant women and elderly people. Their mission is to provide public health nursing services in a manner that maintains dignity, promotes self-reliance and community integrity to enable individuals, families and communities to be healthy and productive.

Contract Health Services. Tribal health programs purchase services for Native patients from private care sources. Physician, dentist, optometrist, hospital and pharmacy are some of the services patients receive. These services are necessary in areas where direct or tribally operated IHS facilities or services are not readily available. The Alaska Native Medical Center often uses contract health care funds for consulting specialists and for providing specialized care such as cardiac or neurological surgery.

Tribally Operated Long-Term Care Services. The Indian Health Service does not provide long-term care services to Alaska Natives. Through the conditions of the Indian Self-Determination Act and with the availability of alternate funding sources, some Alaska tribes are operating long-term care for adolescents, elders and other disabled individuals.

The major driving force in the Alaska long-term care system for the next few decades will be the extremely high growth rate of the elderly population. At the current high growth rate the 65 to 74 age population will double every 14 years, the 75 to 84 age population will double every 12 years, and the 85 and over population will double every 10 years. These growth rates will have lasting consequences in Alaska.

These high growth rates of elderly population are coupled with the high cost of providing long-term care in Alaska. Alaska's nursing home costs per day average about \$271 or \$98,915 a year. In 1999, the State of Alaska Pioneer Homes reported 12 percent of their residents were from rural Alaska, and the nursing homes reported 20 percent of their residents were from rural Alaska.

According to the Providence Extended Care Needs Study¹, Alaska will need an additional 317 new skilled nursing facility beds in 2008 and an additional 1,118 beds in 2118.

The State of Alaska's six Pioneer Homes were converted to assisted living for Alaskans. There are five levels of health service for these homes. The levels of service are: coordinated, comprehensive, basic assisted living, and alzheimer's disease and related disorders. The cost of care depends on the level of health care service.

¹source: State of Alaska Department of Labor and Workforce Development, Research and Analysis, Alaska Economic Trends, December 2001.

The following residential and 24-hour treatment facilities are managed by a tribal health organization.

Bristol Bay Service Unit:

- ❑ Bristol Bay Area Health Corporation operates “Jake’s Place,” a 12 bed crisis/respite home for seriously mentally ill adults in Dillingham.
- ❑ Bristol Bay Area Health Corporation operates “Marrulut Eniit (Grandmother’s House),” a 10 bed assisted living facility for elders in Dillingham.

Interior Alaska Service Unit:

- ❑ Fairbanks Native Association operates “Graf Rheeneerhaanjii Center,” a 18 bed residential substance abuse treatment program for adolescents in Fairbanks.
- ❑ Fairbanks Native Association operates “Ralph Perdue Center,” a 15 bed short-term residential unit, an 8 bed long-term residential unit and a dual diagnosis residential 6 bed unit for alcohol and other addictions.
- ❑ Fairbanks Native Association operates “New Hope Center,” a long-term residential treatment center for chronic alcoholics with psychosis and can serve up to 12 people at one time.
- ❑ Fairbanks Native Association operates “Life Givers,” a 9 bed residential substance abuse treatment program for pregnant teens and their children.
- ❑ Tanana Tribal Council operates “Dina’Dilna’Kka’Ya” a 16 bed elders residence in Tanana.

Norton Sound Service Area:

- ❑ Norton Sound Health Corporation operates “Quyanna Care Center,” a 15 bed 24-hour elder nursing care facility in Nome.

Mt. Edgecumbe Service Unit:

- ❑ Southeast Alaska Regional Health Consortium operates “Raven’s Way,” a residential treatment program for adolescents with substance abuse problems in Sitka.

Yukon Kuskokwim Service Unit:

- ❑ Yukon-Kuskokwim Health Corporation (YKHC) has been operating “Phillips Ayagnirvik” since 1975, a 16-bed residential treatment and recovery program for Alaska Natives suffering from chemical addiction in Bethel.
- ❑ YKHC operates the three year old “Delta Supportive Living Program,” a 5-bed facility that provides housing for graduates of the Crisis Respite Center, of the mentally or socially-challenged individuals from the regional community in Bethel.
- ❑ YKHC operates the “Crisis Respite Center,” a 12 year old program with 6-beds that provides emergency counseling and support services for individuals with mental illness in Bethel.

DEMOGRAPHICS AND STATISTICS ON THE HEALTH STATUS OF ALASKA NATIVES

Statistics Gathered by Clinical Programs:

Alaska Native Tribal Health Consortium (ANTHC) Injury Prevention Program

The Injury Prevention Program in years past has focused its efforts on the leading causes of death and injury hospitalization. One of the main focuses of the Injury Prevention Program has been the reduction of drowning and motor vehicle related injuries. The above chart indicates the percent change in the injury rates for the State of Alaska and compares it to the All U.S. rates from the years 1990 through 1996. While still higher than the U.S. as a whole, the Centers for Disease Control data reveals Alaska experienced a reduction of 42% for the rate of drowning, 20% in motor vehicle related deaths, and a 27% reduction in unintentional injury rates. This reflects the efforts of the Injury Programs to address these issues.

Injury Rate Comparisons Percent Change from 1990 - 1996 Rates per 100,000 Population

	Alaska	U.S.
Motor Vehicle Traffic	-20%	-12%
Pedestrian	32%	-22%
Drowning	-42%	-20%
Suicide	48%	-6%
Homicide	10%	-17%
Fire	16%	-19%
All Other Injuries	-27%	-7%

Source: ANTHC Injury Prevention Program. Data from CDC

ANTHC Immunization Program

The immunization table shows the immunization rates by service area for Alaska Natives.

Region & Immunization Measure	Percent of 2 Year Olds	
	FY 1998	FY 1999
ANMC 1/	86%	90%
Anchorage Villages 1/	73%	83%
Bristol Bay 1/		95%
Y-K-D 1/	77%	
Barrow 1/	87%	84%
Maniilaq 1/	71%	73%
Norton Sound 1/	70%	78%
Fairbanks 2/	88%	92%
Sitka 1/		84%

1/ 4 DTP 3 polio 3 Hib and 1 MMR vaccine by 2 years of age

2/ 4 DTP 3 polio 1 MMR by 2 years of age

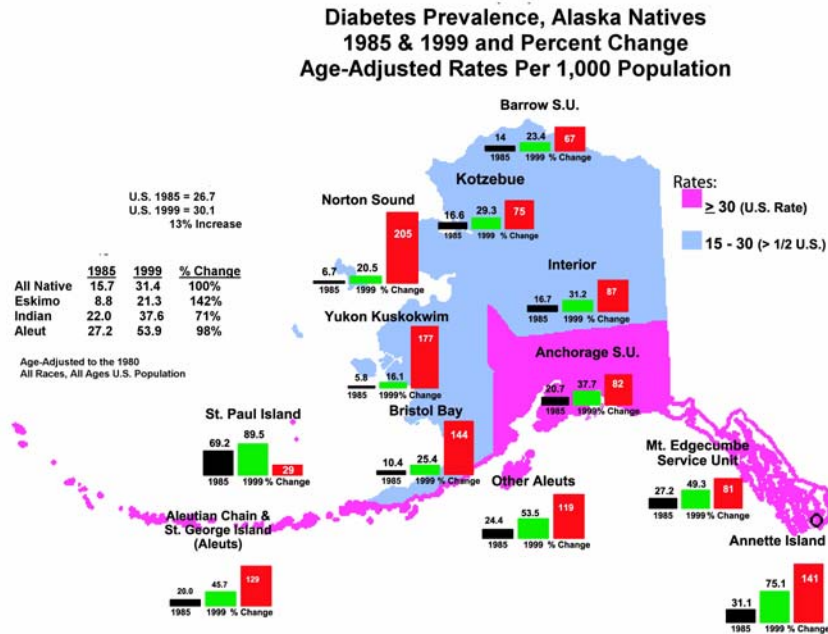
Source: ANTHC Immunization Consultant

ANTHC Diabetes Program

The Consortium diabetes team is tracking and monitoring diabetes among Alaska Natives using a computerized registry at the Alaska Native Medical Center. The program provides educational materials, public service announcements,

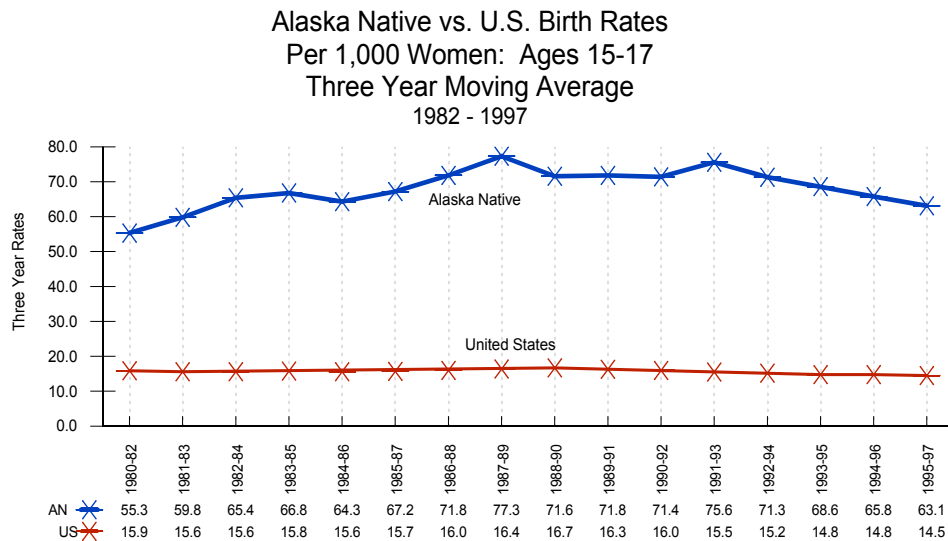
Alaska Area

organizational facilitation and health fair activities to help educate the public on the prevention and treatment of diabetes.



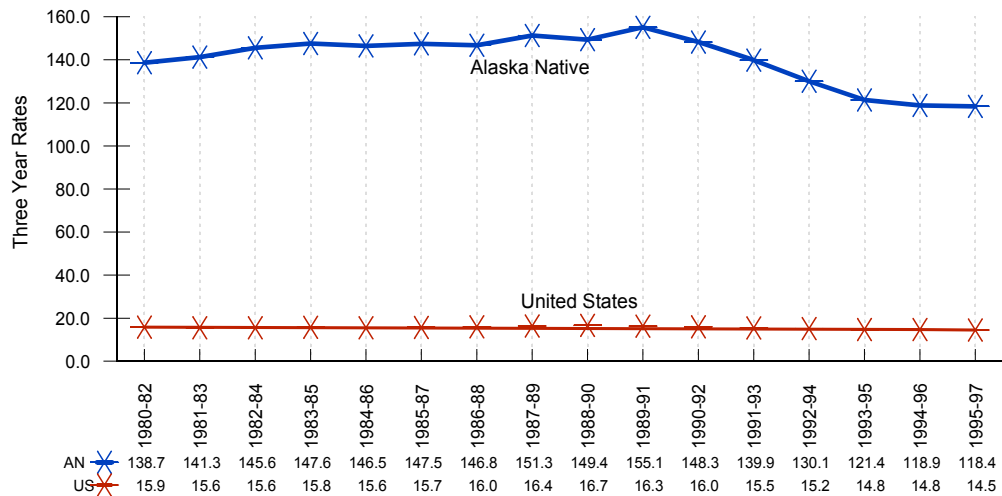
Vital Statistics on the Health Status of Alaska Natives:

Births. Adolescent pregnancy among Alaska Natives is a primary concern. The teen birth rate for Alaska Natives is about four times the U.S. rate.



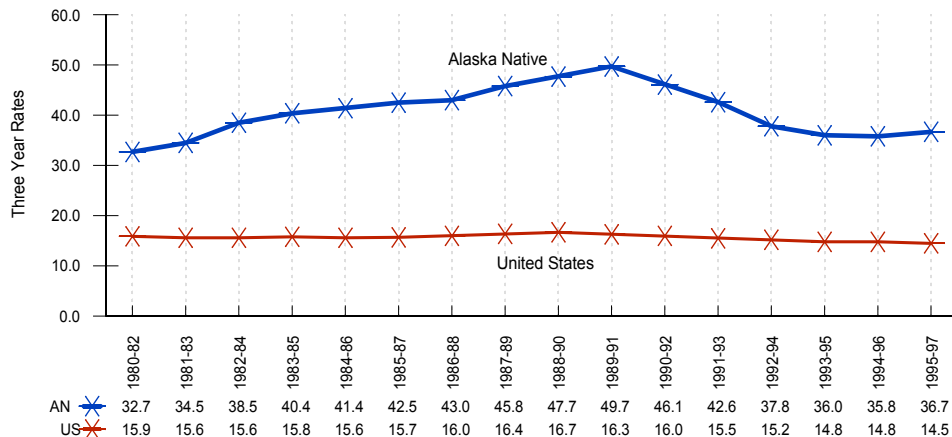
Alaska Native birth rates are rates per 1,000 women aged 15-17. The Alaska Native population figures are from the State of Alaska's Department of Labor publications "Population Overview." Alaska Native births are from IHS report NSU, and the three year average is the end year of the three year period. U.S. rates are the single year indicated. The U.S. rates are from the National Center for Health Statistics.

Alaska Native vs. U.S. Birth Rates
Per 1,000 Women: Ages 15-44
Three Year Moving Average
1982 - 1997



Alaska Native birth rates are rates per 1,000 women aged 15-44. The Alaska Native population figures are from the State of Alaska's Department of Labor publications "Population Overview." Alaska Native births are from IHS report NSU, and the three year average is the end year of the three year period. U.S. rates are the single year indicated. The U.S. rates are from the National Center for Health Statistics.

Alaska Native vs. U.S. Birth Rates
Per 1,000 Women: Ages 35-44
Three Year Moving Average
1982 - 1997



Alaska Native birth rates are rates per 1,000 women aged 35-44. The Alaska Native population figures are from the State of Alaska's Department of Labor publications "Population Overview." Alaska Native births are from IHS report NSU, and the three year average is the end year of the three year period. U.S. rates are the single year indicated. The U.S. rates are from the National Center for Health Statistics.

Alaska Area

Mortality. The following tables display the total Alaska Native deaths by age and the three-year average crude death rates per 100,000 population for Alaska.

Infant Death Rates. The Alaska Area is committed to reduce infant mortality among Native Alaskans. Efforts include on-site reviews for unexplained infant deaths and continuing a prenatal high risk identification and tracking program.

Prematernal homes provide shelter close to hospitals for high risk and other village women awaiting delivery.

Through education,

patients are becoming more aware of the need for a healthy life style during pregnancy and the need to deliver in a safe environment. These activities have decreased the number of unsafe village deliveries.

Alaska Area
Alaska Native Deaths by Age and
Three-Year Average Crude Death Rates per 100,000 Population

	1995	1996	1997	3 -Year Rate
Total Deaths	560	611	614	595.8
Age at Death:				
under 5	29	37	37	
5-9	5	4	8	
10-14	9	7	6	
15-24	28	45	36	
25-44	128	98	112	
45-64	123	152	140	
64+	233	267	269	
Age Unknown	4	1	2	
Area Unknown	1	0	4	

Leading Causes of Death	1993-1995 /4		1994-1996 /4		1995-1997 /4	
	AI/AN	U.S.	AI/AN	U.S.	AI/AN	U.S.
1) Malignant Neoplasms /1	111.8	204.9	108.2	203.4	113.5	201.6
Lung Cancer	32.2	57.5	36.2	57.3	37.7	59.2
2) Heart Disease	102.4	280.7	109.6	276.4	104.1	271.6
3) Unintentional Injuries (Accidents) /2	108.0	35.5	109.3	35.8	99.5	35.7
Motor Vehicles	26.9	16.5	27.7	16.5	26.0	16.2
Water Transport/Drowning	26.6	1.7	24.6	1.6	20.4	19.5
4) Alcohol Related /3	38.8	7.7	42.7	7.5	41.4	7.3
5) Suicide	46.5	11.9	43.0	11.6	36.4	11.4
6) Cerebrovascular	33.2	60.1	31.1	60.3	30.0	59.7
7) Chronic Obst. Pul. Diseases	23.4	39.2	24.6	40	24.7	40.7
8) Influenza & Pneumonia	17.1	31.6	15.4	31.6	14.4	32.3
9) Homicide	15.4	8.7	11.9	7.9	13.4	7.4
10) Cirrhosis	16.4	9.6	14.3	9.4	13.0	9.4

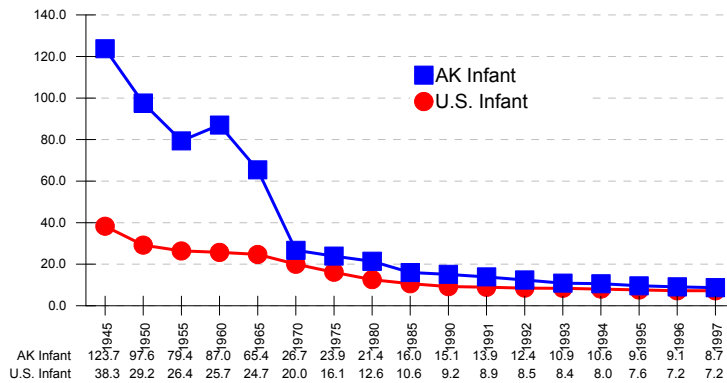
1/ Lung Cancer is included in Malignant Neoplasms.

2/ Does not include injuries purposefully inflicted or injuries undetermined whether purposefully or accidentally inflicted. Motor Vehicle and Water Transport/Drowning are also counted in the total Accidents; it does not include alcohol related deaths.

3/ Alcohol Related deaths include alcoholic psychoses, alcohol dependence syndrome, alcohol abuse, alcoholic liver disease and cirrhosis, alcoholic polyneuropathy, alcoholic cardiomyopathy, alcoholic gastritis, excessive blood level of alcohol, and accidental poisoning by alcoholic beverages and ethyl alcohol.

4/ Causes not included when deaths average less than one per year in 1995-97. Single year rates for U.S. Alaska Area Native Health Service, Division of Planning, Evaluation & Health Statistics.

Infant Mortality Rates
Alaska Natives vs. U.S.: 1945 - 1997



Alaska Native rates are based on three year averages, using the end year of the three year period. U.S. rates are from the National Center for Health Statistics (NCHS), and are single year rates. Infant death rates are deaths per 1,000 live births. Alaska Native infant deaths are from IHS report MINFDTH. Birth rates are rates per 1,000 total population. Alaska Native births are from IHS report NSU.

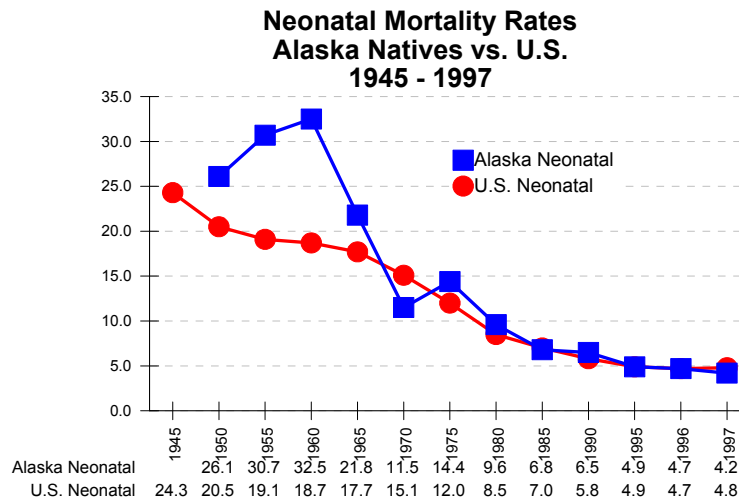
Neonatal Death Rates. The following graph compares the Alaska Native and U.S. neonatal mortality rates.

The postneonatal and neonatal mortality rates are combined as the infant mortality rate. Alaska Native neonatal mortality is not significantly different from U.S. rates.

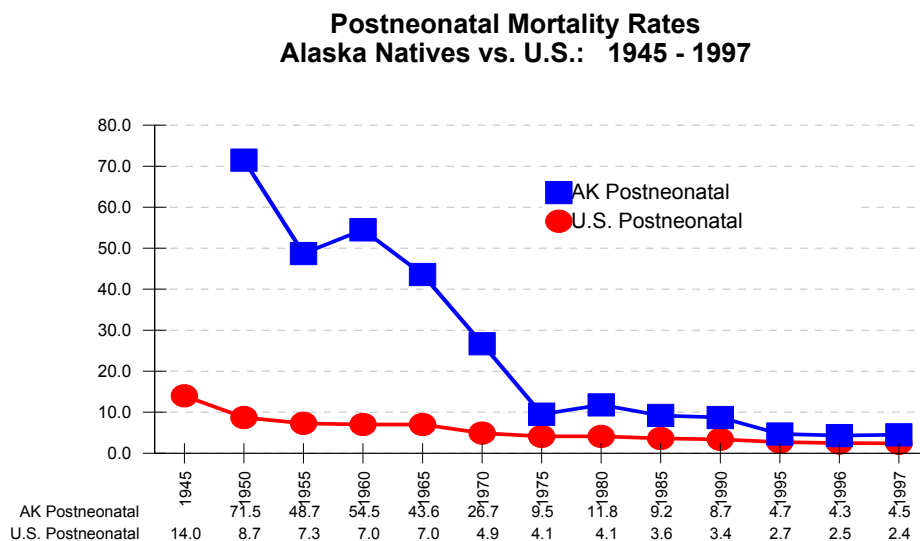
Postneonatal mortality is most notably from Sudden Infant Death

Syndrome (SIDS), which contributes to the overall high infant

mortality rate. SIDS is the unexpected and sudden death of an apparently normal and healthy infant that occurs during sleep and with no physical evidence of disease. On-going activities to decrease this rate are the Alaska Area Infant Mortality Review Committee meetings, public health nursing home visits, and participation in the State of Alaska Infant Mortality Review Committee.



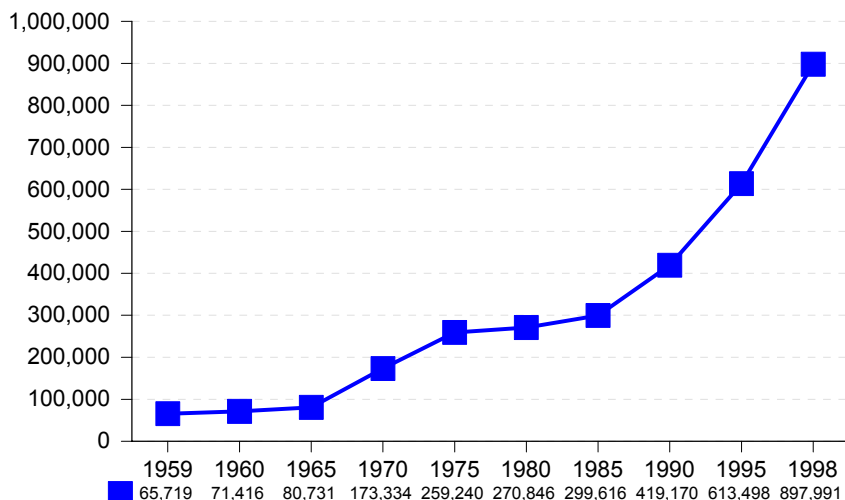
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OUTPATIENT WORKLOAD/DIAGNOSES

Alaska Area Outpatient Workload 1959 - 1998



Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 1A.

Alaska Area Leading Causes of Outpatient Visits for All Age Groups: FY 1994 - FY 1997

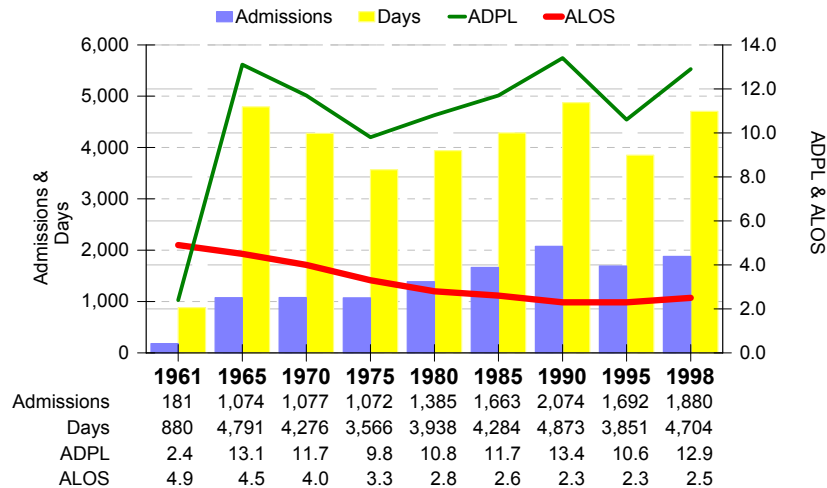
All Age Groups	FY 1995	FY 1996	FY 1997	FY 2001
Tests Only	32,041	33,068	44,475	
Upper Respiratory Problems	49,875	55,180	59,791	
Accidents & Injuries	35,912	35,904	40,458	
Otitis Media	30,819	32,815	33,803	
Hospital Medical/Surgical Follow-up	25,075	29,558	29,752	
Bone & Joint Disorders	21,090	23,760	28,002	
Neuroses & Non-Psychotic Disorders	22,166	23,396	27,797	
Hypertension	18,750	22,102	26,418	
Immunization	18,839	24,510	23,772	
Prenatal Care	24,364	24,929	22,811	

Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 1C.

INPATIENT WORKLOAD

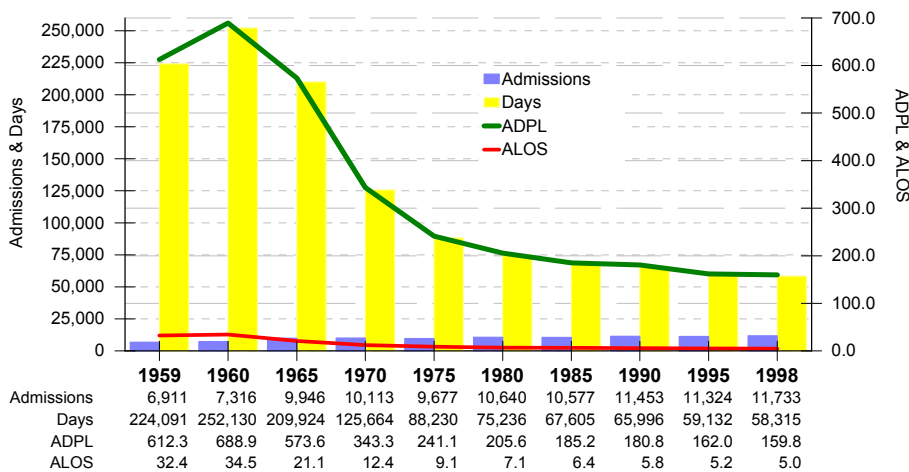
The following graphs display the inpatient workload including and excluding newborns for the Alaska Area.

Newborn Inpatient Workload Alaska Area: FY 1961 - FY 1998



ADPL = Average Daily Patient Load; ALOS = Average Length of Stay
Source: HSA-202 Monthly Report of Inpatient Services

Inpatient Workload Excluding Newborns Alaska Area: FY 1959 - FY 1998



ADPL = Average Daily Patient Load; ALOS = Average Length of Stay
Source: HSA-202 Monthly Report of Inpatient Services

DISCHARGE DIAGNOSES

Alaska Area Leading Causes of Inpatient Discharges: FY 1994 - FY 2001

All Age Groups	FY 1995	FY 1996	FY 1997	FY2001
Deliveries (Childbirth)	1,693	1,827	1,781	1,806
Accidents & Injuries	1,374	1,404	1,285	1,350
Pneumonia	662	740	643	646
Complications of Pregnancy	493	503	558	470
Infected Skin & Abrasions	191	240	241	466
Heart Disease	407	463	498	462
Bronchitis, Emphysema	301	388	394	398
Alcohol Abuse	405	436	304	265
Malignant Neoplasms	212	258	263	253
Gynecologic Problems & Breast	211	233	216	231

Source: Indian Health Service Inpatient/Outpatient Reporting System in Albuquerque, APC Report 2C.
Data for fiscal years 1998, 1999 and 2000 are not available because of data problems during that time period.

OTHER ISSUES CRITICAL TO THE ALASKA AREA

Health Care Costs in Alaska - Cost of Doing Business in Alaska. The Alaska tribal health organizations spends more per-capita to provide medical and community health care services in Alaska than it does in any of the lower 48 states.

In most parts of the country, the highest costs of delivering health care services are found in urban areas. This does not hold true in Alaska, where rural residents generally face higher costs than those found in the state's major population centers.

Health Access Issues and Patient Travel Costs in Alaska. The majority of Alaska Natives reside in small communities, which are isolated from regional hospitals and health centers by immense distances, climatic extremes and geographic barriers. Most rural Alaska communities are not accessible by road, and can be reached only by boat, snowmachine and small aircraft. Several rural communities that serve as regional hubs have commercial jet service.

Costs of travel for patients to access any services not available through the community health aide at the village clinics are substantial. The airfare can range from \$100 - \$200, and airfare to the nearest regional hospital can cost \$800 - \$1,200 between the village and the Alaska Native Medical Center in Anchorage for specialty care. When surface transportation and lodging costs are included, the cost of routine care is beyond the means of many patients, resulting in the deferral of care and increased likelihood of more serious illness.

Alaska Area

INDIAN HEALTH SERVICE FUNDS FY 2002

Akiachak		Chugachmiut	
Services	\$318,392	Services	\$3,116,745
Environmental Health	\$0	Environmental Health	\$49,144
Contract Support Costs	\$100,263	Contract Support Costs	\$1,352,907
Total	\$418,655	Total	\$4,518,796
ANTHC		CATG	
Services	\$82,941,316	Services	\$206,028
Environmental Health	\$45,547,126	Environmental Health	\$0
Contract Support Costs	\$8,606,005	Contract Support Costs	\$58,866
Total	\$137,094,447	Total	\$264,894
APIA		Copper River	
Services	\$1,933,240	Services	\$1,601,201
Environmental Health	\$57,082	Environmental Health	\$17,515
Contract Support Costs	\$787,762	Contract Support Costs	\$658,210
Total	\$2,778,084	Total	\$2,276,926
Arctic Slope		Diomede	
Services	\$8,851,523	Services	\$107,500
Environmental Health	\$327,345	Environmental Health	\$0
Contract Support Costs	\$3,852,877	Contract Support Costs	\$85,902
Total	\$13,031,745	Total	\$193,402
Bristol Bay		East Aleutians	
Services	\$17,488,423	Services	\$1,315,856
Environmental Health	\$645,966	Environmental Health	\$14,619
Contract Support Costs	\$7,173,870	Contract Support Costs	\$432,031
Total	\$25,308,259	Total	\$1,762,506
Chickaloon		Eklutna	
Services	\$23,315	Services	\$137,442
Environmental Health	\$0	Environmental Health	\$1,191
Contract Support Costs	\$15,600	Contract Support Costs	\$24,272
Total	\$38,915	Total	\$162,905
Chitina		Hoonah	
Services	\$123,848	Services	\$293,190
Environmental Health	\$610	Environmental Health	\$2,707
Contract Support Costs	\$91,467	Contract Support Costs	\$129,407
Total	\$215,925	Total	\$425,304

Alaska Area

Indian Health Service Funds FY 2002

Karluk		Metlakatla	
Services	\$110,407	Services	\$2,336,254
Environmental Health	\$323	Environmental Health	\$75,174
Contract Support Costs	\$78,272	Contract Support Costs	\$677,283
Total	\$189,002	Total	\$3,088,711
Kenaitze		Mt. Sanford	
Services	\$1,156,750	Services	\$619,309
Environmental Health	\$5,158	Environmental Health	\$1,334
Contract Support Costs	\$221,949	Contract Support Costs	\$223,767
Total	\$1,383,857	Total	\$844,410
Ketchikan		Ninilchik	
Services	\$3,964,588	Services	\$383,099
Environmental Health	\$80,806	Environmental Health	\$1,911
Contract Support Costs	\$2,397,407	Contract Support Costs	\$229,964
Total	\$6,442,801	Total	\$614,974
Knik		Norton Sound	
Services	\$34,846	Services	\$15,993,061
Environmental Health	\$0	Environmental Health	\$632,796
Contract Support Costs	\$16,957	Contract Support Costs	\$5,370,670
Total	\$51,803	Total	\$21,996,527
Kodiak		Seldovia	
Services	\$5,037,456	Services	\$722,709
Environmental Health	\$77,493	Environmental Health	\$2,381
Contract Support Costs	\$1,488,360	Contract Support Costs	\$272,597
Total	\$6,603,309	Total	\$997,687
Kwinhagak		Southcentral	
Services	\$251,351	Services	\$45,178,627
Environmental Health	\$0	Environmental Health	\$470,912
Contract Support Costs	\$103,736	Contract Support Costs	\$13,970,445
Total	\$355,087	Total	\$59,619,984
Maniilaq		SEARHC	
Services	\$22,154,923	Services	\$29,495,791
Environmental Health	\$548,800	Environmental Health	\$790,053
Contract Support Costs	\$9,846,945	Contract Support Costs	\$8,109,235
Total	\$32,550,668	Total	\$38,395,079

Alaska Area

Indian Health Service Funds FY 2002

St. George

Services	\$134,035
Environmental Health	\$1,168
Contract Support Costs	\$39,548
Total	\$174,751

Tanana Chiefs

Services	\$25,133,100
Environmental Health	\$499,536
Contract Support Costs	\$5,057,646
Total	\$30,690,282

Tanana IRA

Services	\$820,495
Environmental Health	\$46,574
Contract Support Costs	\$230,056
Total	\$1,097,125

Tyonek

Services	\$219,703
Environmental Health	\$495
Contract Support Costs	\$72,872
Total	\$293,070

Valdez

Services	\$158,330
Environmental Health	\$491
Contract Support Costs	\$71,360
Total	\$230,181

Yakutat

Services	\$272,074
Environmental Health	\$0
Contract Support Costs	\$96,052
Total	\$368,126

Yukon Kuskokwim

Services	\$34,508,914
Environmental Health	\$1,272,232
Contract Support Costs	\$13,459,580
Total	\$49,240,726

Area Residual

Services	\$6,343,970
Environmental Health	\$522,196
Contract Support Costs	\$0
Total	\$6,866,166

Area Transitional Residual

Services	\$6,343,970
Environmental Health	\$522,196
Contract Support Costs	\$0
Total	\$6,866,166

GRAND TOTAL

Services	\$320,189,039
Environmental Health	\$52,526,832
Contract Support Costs	\$86,292,159
Total	\$459,008,030